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PTO/SB/01 (10-00)

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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      OR      ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 5/1245 PCT

First Named Inventor RAINER, W.

**COMPLETE IF KNOWN**

Application Number 09 / 787,974

Filing Date March 23, 2001

Group Art Unit

Examiner Name

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

New substituted Indolinones, their preparation and their use as medicaments

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) March 23, 2001

as United States Application Number or PCT International

Application Number 09/787,974 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached?<br>YES NO |                                     |
|-------------------------------------|---------|----------------------------------|--------------------------|------------------------------------|-------------------------------------|
| 198 44 003.0                        | DE      | 09/25/1998                       | <input type="checkbox"/> | <input type="checkbox"/>           | <input checked="" type="checkbox"/> |
| 199 37 496.1                        | DE      | 08/07/1999                       | <input type="checkbox"/> | <input type="checkbox"/>           | <input checked="" type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>           | <input type="checkbox"/>            |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
|                       |                          |  |

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

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Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

Rainer

(first and middle [if any])

Family Name

WALTER

or Surname

Inventor's  
Signature

*R. Ueller*

Date

30.4.2001

Residence: City

Biberach

State

Country

DE

Citizenship

DE

Mailing Address Probststrasse 3

Mailing Address

City Biberach

State

ZIP

D-88400

Country

DE

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Wolfgang

(first and middle [if any])

Family Name

GRELL

or Surname

Inventor's  
Signature

*W. Grell*

Date

June 27, 2001

Residence: City

Biberach

State

Country

DE

Citizenship

DE

Mailing Address Geschwister-Scholl-Strasse 18

Mailing Address

City Biberach

State

ZIP

D-88400

Country

DE

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

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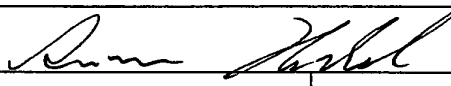

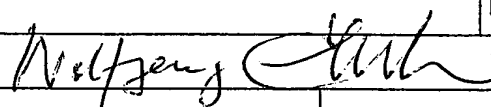
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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 1 of 3

|  |                |   |             |
|--|----------------|---|-------------|
| Name of Additional Joint Inventor, if any:   |                | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle [if any])   |                | Family Name or Surname  |             |
| Armin  |                | HECKEL  |             |
| Inventor's Signature    |                | Date <u>2.5.07</u>  |             |
| Residence: City  | Biberach       | State   | Country DE  |
| Citizenship DE   |                |   |             |
| Mailing Address Geschwister-Scholl-Strasse 71  |                |   |             |
| Mailing Address  |                |   |             |
| City   | Biberach       | State   | ZIP D-88400 |
|  |                | Country   | DE          |
| Name of Additional Joint Inventor, if any:   |                | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle [if any])   |                | Family Name or Surname  |             |
| Frank  |                | HIMMELSBACH   |             |
| Inventor's Signature  |                | Date <u>May 5, 01</u>   |             |
| Residence: City  | Mittelbiberach | State   | Country DE  |
| Citizenship DE   |                |   |             |
| Mailing Address Ahornweg 16  |                |   |             |
| Mailing Address  |                |   |             |
| City   | Mittelbiberach | State   | ZIP D-88441 |
|  |                | Country   | DE          |
| Name of Additional Joint Inventor, if any:   |                | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle [if any])   |                | Family Name or Surname  |             |
| Wolfgang   |                | EBERLEIN  |             |
| Inventor's Signature  |                | Date <u>June 21, 01</u>   |             |
| Residence: City  | Biberach       | State   | Country DE  |
| Citizenship DE   |                |   |             |
| Mailing Address Obere Au 6   |                |   |             |
| Mailing Address  |                |   |             |
| City   | Biberach       | State   | ZIP D-88400 |
|  |                | Country   | DE          |

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Case No. 5/1245 PCT

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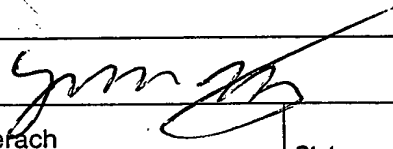
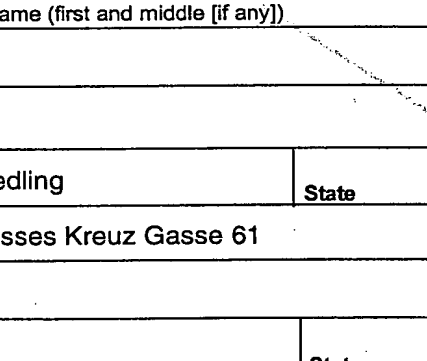
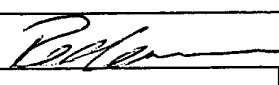
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## DECLARATION

## ADDITIONAL INVENTOR(S)

### Supplemental Sheet

Page 2 of 3

|  |          |   |             |
|--|----------|---|-------------|
| Name of Additional Joint Inventor, if any:   |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle [if any])   |          | Family Name or Surname  |             |
| Gerald   |          | ROTH  |             |
| Inventor's Signature    |          | Date <u>7.5.01</u>  |             |
| Residence: City  | Biberach | State   | Country DE  |
| Citizenship DE   |          |   |             |
| Mailing Address Akazienweg 47  |          |   |             |
| Mailing Address  |          |   |             |
| City   | Biberach | State   | ZIP D-88400 |
|  |          | Country   | DE          |
| Name of Additional Joint Inventor, if any:   |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle [if any])   |          | Family Name or Surname  |             |
| Jacobus C.A.   |          | van Meel  |             |
| Inventor's Signature  |          | Date  |             |
| Residence: City  | Moedling | State   | Country AT  |
| Citizenship NL   |          |   |             |
| Mailing Address Weisses Kreuz Gasse 61   |          |   |             |
| Mailing Address  |          |   |             |
| City   | Moedling | State   | ZIP A-2340  |
|  |          | Country   | AT          |
| Name of Additional Joint Inventor, if any:   |          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |             |
| Given Name (first and middle [if any])   |          | Family Name or Surname  |             |
| Norbert  |          | REDEMANN  |             |
| Inventor's Signature  |          | Date <u>15.5.01</u>   |             |
| Residence: City  | Biberach | State   | Country DE  |
| Citizenship DE   |          |   |             |
| Mailing Address Kohlesrain 48  |          |   |             |
| Mailing Address  |          |   |             |
| City   | Biberach | State   | ZIP D-88400 |
|  |          | Country   | DE          |

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## DECLARATION

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### Supplemental Sheet

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|  |              |   |            |
|--|--------------|---|------------|
| Name of Additional Joint Inventor, if any: |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |            |
| Given Name (first and middle [if any])     |              | Family Name or Surname  |            |
| Walter                                     |              | SPEVAK  |            |
| Inventor's Signature                       |              | Date  |            |
| Residence: City                            | Oberrohrbach | State   | Country AT |
| Mailing Address                            |              | Citizenship AT  |            |
| Leoberndorfer Strasse 36                   |              |   |            |
| Mailing Address                            |              |   |            |
| City                                       | Oberrohrbach | ZIP   | A-2105     |
| State                                      |              | Country AT  |            |
| Name of Additional Joint Inventor, if any: |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |            |
| Given Name (first and middle [if any])     |              | Family Name or Surname  |            |
| Ulrike                                     |              | TONTSCH-GRUNT   |            |
| Inventor's Signature                       |              | Date  |            |
| Residence: City                            | Baden        | State   | Country AT |
| Mailing Address                            |              | Citizenship AT  |            |
| Oetkerweg 23                               |              |   |            |
| Mailing Address                            |              |   |            |
| City                                       | Baden        | ZIP   | A-2500     |
| State                                      |              | Country AT  |            |
| Name of Additional Joint Inventor, if any: |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |            |
| Given Name (first and middle [if any])     |              | Family Name or Surname  |            |
| Thomas                                     |              | von RUEDEN  |            |
| Inventor's Signature                       |              | Date  |            |
| Residence: City                            | Planegg      | State   | Country DE |
| Mailing Address                            |              | Citizenship DE  |            |
| Walter-Sartorius-Strasse 6                 |              |   |            |
| Mailing Address                            |              |   |            |
| City                                       | Planegg      | ZIP   | D-81152    |
| State                                      |              | Country DE  |            |

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DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing      OR      ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

**Attorney Docket Number** 5/1245 PCT

**First Named Inventor** RAINER, W.

**COMPLETE IF KNOWN**

**Application Number** 09 / 787,974

**Filing Date** March 23, 2001

**Group Art Unit**

**Examiner Name**

**As a below named inventor, I hereby declare that:**

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

New substituted Indolinones, their preparation and their use as medicaments

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) March 23, 2001

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| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached? |                                     |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|-------------------------------------|
|                                     |         |                                  |                          | YES                      | NO                                  |
| 198 44 003.0                        | DE      | 09/25/1998                       | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 199 37 496.1                        | DE      | 08/07/1999                       | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
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## DECLARATION — Utility or Design Patent Application

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Customer Number  
or Bar Code Label



OR ☐

Correspondence address below

28505

PATENT TRADEMARK OFFICE

Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐ A petition has been filed for this unsigned inventor

Given Name

Rainer

(first and middle [if any])

Family Name

WALTER

or Surname

Inventor's  
Signature

Date

Residence: City

Biberach

State

Country

DE

Citizenship

DE

Mailing Address

Probststrasse 3

Mailing Address

City Biberach

State

ZIP

D-88400

Country

DE

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

Wolfgang

(first and middle [if any])

Family Name

GRELL

or Surname

Inventor's  
Signature

Date

Residence: City

Biberach

State

Country

DE

Citizenship

DE

Mailing Address

Geschwister-Scholl-Strasse 18

Mailing Address

City Biberach

State

ZIP

D-88400

Country

DE

☒ Additional inventors are being named on the 3 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → +

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 1 of 3

|   |       |   |                |
|---|-------|---|----------------|
| <b>Name of Additional Joint Inventor, if any:</b> |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
| Given Name (first and middle [if any])            |       | Family Name or Surname  |                |
| Armin   |       | HECKEL  |                |
| Inventor's Signature                              |       | Date  |                |
| Residence: City Biberach                          | State | Country DE  | Citizenship DE |
| Mailing Address Geschwister-Scholl-Strasse 71     |       |   |                |
| Mailing Address                                   |       |   |                |
| City Biberach                                     | State | ZIP D-88400   | Country DE     |
| <b>Name of Additional Joint Inventor, if any:</b> |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
| Given Name (first and middle [if any])            |       | Family Name or Surname  |                |
| Frank   |       | HIMMELSBACH   |                |
| Inventor's Signature                              |       | Date  |                |
| Residence: City Mittlbiberach                     | State | Country DE  | Citizenship DE |
| Mailing Address Ahornweg 16                       |       |   |                |
| Mailing Address                                   |       |   |                |
| City Mittlbiberach                                | State | ZIP D-88441   | Country DE     |
| <b>Name of Additional Joint Inventor, if any:</b> |       | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
| Given Name (first and middle [if any])            |       | Family Name or Surname  |                |
| Wolfgang  |       | EBERLEIN  |                |
| Inventor's Signature                              |       | Date  |                |
| Residence: City Biberach                          | State | Country DE  | Citizenship DE |
| Mailing Address Obere Au 6                        |       |   |                |
| Mailing Address                                   |       |   |                |
| City Biberach                                     | State | ZIP D-88400   | Country DE     |

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 2 of 3

|   |              |   |                       |
|---|--------------|---|-----------------------|
| <b>Name of Additional Joint Inventor, if any:</b> |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                       |
| Given Name (first and middle [if any])            |              | Family Name or Surname  |                       |
| Gerald  |              | ROTH  |                       |
| <b>Inventor's Signature</b>                       |              | <b>Date</b>   |                       |
| <b>Residence: City</b> Biberach                   | <b>State</b> | <b>Country</b> DE   | <b>Citizenship</b> DE |
| <b>Mailing Address</b> Akazienweg 47              |              |   |                       |
| <b>Mailing Address</b>                            |              |   |                       |
| <b>City</b> Biberach                              | <b>State</b> | <b>ZIP</b> D-88400  | <b>Country</b> DE     |
| <b>Name of Additional Joint Inventor, if any:</b> |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                       |
| Given Name (first and middle [if any])            |              | Family Name or Surname  |                       |
| Jacobus C.A.                                      |              | van Meel  |                       |
| <b>Inventor's Signature</b>                       |              | <b>Date</b> 18.05.2001  |                       |
| <b>Residence: City</b> Moedling                   | <b>State</b> | <b>Country</b> AT   | <b>Citizenship</b> NL |
| <b>Mailing Address</b> Weisses Kreuz Gasse 61     |              |   |                       |
| <b>Mailing Address</b>                            |              |   |                       |
| <b>City</b> Moedling                              | <b>State</b> | <b>ZIP</b> A-2340   | <b>Country</b> AT     |
| <b>Name of Additional Joint Inventor, if any:</b> |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                       |
| Given Name (first and middle [if any])            |              | Family Name or Surname  |                       |
| Norbert   |              | REDEMANN  |                       |
| <b>Inventor's Signature</b>                       |              | <b>Date</b>   |                       |
| <b>Residence: City</b> Biberach                   | <b>State</b> | <b>Country</b> DE   | <b>Citizenship</b> DE |
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| <b>Mailing Address</b>                            |              |   |                       |
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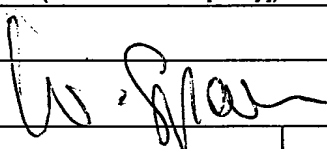
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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
Supplemental Sheet  
Page 3 of 3

|  |              |   |                |
|--|--------------|---|----------------|
| <b>Name of Additional Joint Inventor, if any:</b>  |              | <input type="checkbox"/> A petition has been filed for this unsigned inventor |                |
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| Ulrike   |              | TONTSCH-GRUNT   |                |
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| Thomas   |              | von RUEDEN  |                |
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